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Parent/Adolescent Relationships and Identity Development

Literature Review and Policy Statement

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Parent/Adolescent Relationships and Identity Development

A Literature Review and Policy Statement

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Report to

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Executive Summary

This paper includes a critical review of research literature linking relationships between parent/adolescent relationships, adolescent identity formation, and physical and emotional health within dimensions of the cultural context. We point out both what is known, and what needs be studied further. The paper is written with a culture-identity link and has its foundations within original conceptualizations offered by Erik H. Erikson and Margaret Mead and empirical research in sociology, psychology, family studies and other allied social and behavioural sciences. Recommendations for actions regarding what society, parents, and adolescents should know and do are provided.

Findings

Research Question 1:

What are the facilitators and barriers to optimal identity development?

Optimal identity formation involves a firm and clear sense of self with the ability to explore the meaning, direction and purpose of life. A healthy identity is accompanied by a sense of confidence in exploring and making decisions and faith in society to support an individual's personal or social identity. Changes in identity occur because of maturation (psychological and physical) and institutional or environmental barriers or opportunities. Social conditions that support healthy identity formation include promoting adolescents' use of problem-solving coping strategies, exploration of options, encouragement of social competence, and acknowledgment of who one is from the past, to the present and into the future. Social contexts can also be a barrier to identity development if they are unreasonably restrictive or do not provide resources for adolescents to explore values, meanings and directions in life and to receive appropriate validation for their ideas and beliefs.

Research Question 2:

What connection is there between culture, identity formation, parent/adolescent relationships and health?

Three family forms emerge across societies with variations in parental authority. Pre-modern or pre-industrial cultures often have three generations living together and the parental figures hold most of the power of authority. An adolescent's identity is given or assigned by parents or elders. This form of identity is often called foreclosed. In contemporary times, the intergenerational

linkage has been weakened because of technology and changes in economic and social systems. This has resulted in each generation experiencing a different socialization experience, with families most often living in separate dwellings and often at great distances from family members. This requires each individual to develop a personal sense of self and the meaning of identity is based on an individuation process (separation from family and self-construction of identity). The major form of identity that emerges from this context is called identity achieved. The globalization of the economy leaves parents with an uncertain or vague sense of what the future holds for children and youth. There is uncertainty about what identities will best fit in the future. The power of authority is being assumed by the child or the adolescent. That is, the child may actually teach the parent the standards of behaviour, goals, values or identity impression. The major form of identity from this emerging culture is likely to either be diffused or a form of constant searching for meaning and impression management.

A postfigurative culture uses primarily an authoritarian (less responsive and more controlling) parenting style. In turn, authoritarian parenting behaviours tend to encourage a sense of foreclosed identity or an identity that is based on imitation and identification of roles as suggested by parents and other adult authority figures. In contrast, a cofigurative culture uses a democratic authoritative parenting style. An authoritative parenting style allows offspring expression of independence within warm and responsive relationships, and encourages the development of a healthy identity (identity achievement). The emerging future appears to be a prefigurative culture that supports permissive child rearing. Permissive child rearing is thought to support two forms of identity: identity diffusion (very little reflection about choices and little commitment to present or future adult roles) and characterological moratorium (little commitment to present or future roles).

The connection between culture, identity and health involves several linkages. Each of the three cultures provides an environment that is more likely to facilitate a particular form of identity. Each form of identity has its own health implications. Identity-achieved and foreclosed adolescents are less likely to encounter health risks. Available research on identity diffusion suggests it is connected to high-risk behaviours, maladjustment, delinquency, poor social skills and various health-risk behaviours. Little is known about characterological moratorium, where the individual is caught in a web of constantly searching for a sense of self. It is likely that this form of indecision is associated with similar health outcomes as identity diffusion.

Research Question 3:

Are there apparent societal and government policy implications that emerge from the research literature regarding identity and health?

Many youth are encouraged, through permissive parenting and mass media messages, to focus on a pleasure-seeking life of consumption. Youth who choose a life of consumption, fads, pleasure seeking and avoidance of commitment to values, beliefs and social roles are not likely to gain the necessary social skills and resources to create a clear and firm sense of self. These youth may, in turn, engage in health-risk behaviours such as eating disorders, drug and alcohol mis-use, or impulsively engage in high-risk games. In contrast, youth reared in a community that expects and supports a coordinated set of expectations and standards for caring for others and community participation will likely formulate a productive sense of identity. These youth are likely to be socially competent, make good choices and avoid activities that put them at risk for health problems.

Recommendations

What Parents Need to Know and Do

- Contemporary parenting presents an emerging set of challenges that is associated with ongoing cultural change. In a rapidly changing society, the life-course trajectory for adolescents is less clear. The authority of parents is less certain and possibly undermined by societal and technological change. It has been argued that there is a link between culture, family relations, identity development and health behaviours. From the analysis, the following suggestions are made to parents.

- In a more agrarian and pre-industrial society, parents used various forms of adult-authority practices in their parenting. Adolescents were instructed to know their place and they were assigned their roles and identity. In the recent industrial area, societal norms and conventions encouraged more democratic parental practices that included the use of warmth, shared authority and control, and a greater sense of mutuality between parent and adolescent. This democratic parenting practice encouraged self-expression, independence and the self construction of identity. In the emerging society, parents are adopting a permissive child-rearing style where youth inform the parents of acceptable standards of conduct, norms and conventions. In this emerging cultural form, youth can avoid the formation of a fixed identity, and are likely to simply manage impressions within each situation. The permissive child rearing,

within a media-based society, is encouraging youth to assume a diffuse and avoidant form of identity or allow individuals to be in constant flux in formulating a sense of self.

- Research within the last 20 years has shown that allowing children some freedom of expression in a safe and secure environment encouraged or facilitated optimal identity formation. Adolescents and young adults raised in such a family environment were supported in building social skills, acquiring relevant social knowledge, identifying acceptable values, goals or commitments and likely acquired a healthy sense of identity achievement. The evidence clearly shows parents that an informational-based and self-constructed sense of identity, known as moratorium and achievement, has been found to be associated with greater social success, balanced personality, and emotional and behavioural health. In contrast, identity diffusion has been found to be associated with health-risk behaviours.

- Parental practices that encourage adolescents to develop the ability to deal with complex issues and make decisions help them to avoid identity diffusion. Parenting practices that enhance reflective thinking promote children's belief in their own agentic power (own actions to influence the world), help children learn to regard others' views in making decisions, and foster tolerance of differences between people. All of these factors reduce adolescents' impulsive behaviours and enhance thoughtful identity formation.

- When assisting adolescents to establish their personal goals and values, parents should help them to reflect on their own experiences and situations of others, rather than relying solely on parental commands. Ask questions that help teenagers to make judgments about their own behaviours. Learning to make careful and considerate judgments about behaviours helps adolescents to become thoughtful about their own identity formation and the consideration of risk and outcome.

- It is helpful for parents to consider how, as their adolescent develops, expectations for behaviour can be adjusted. During early adolescence there is, often, considerable disagreement about appropriate expectations for behaviour. In middle to late adolescence, most of the differences gradually diminish along with the disagreements. Parents may feel some frustration over disagreements in early adolescence. But it is important to establish reasonable expectations of behaviour using clear explanations that focus on relevant issues and to support the adolescent's growing need for psychological autonomy.

- Adolescents benefit from parents' acceptance of even difficult behaviour where it is not actually harmful to the youth or the family. Parents' expressions of warmth and interest while attempting to avoid hostility, restrictions or emotional distance provide a more democratic environment that enhances healthy identity formation.

- Parents can encourage schools and community agencies to develop family/school prevention programs that support career and identity formation. Use local consultants with expertise on adolescence to acquire information, knowledge and analysis of potential programs for enhancing identity development.

What Adolescents Need to Know and Do

- It is important to understand how the media, music industry, magazines and advertisers, and even peers attempt to persuade individuals to endorse ideas and values that may or may not be beneficial for their well-being. Critical reasoning skills and the personal resources to evaluate information enable adolescents to resist immediate gratification and temptations to pursue pleasures over responsible behaviours that allow individuals to take and maintain control over the direction of their own life. The following suggestions are for adolescents.

- There are, in general, three forms of identity among adolescents and young adults. Knowing about these three forms help teenagers to reflect on how they can manage their own identity development. The diffused style is the avoidance of making commitments and rather passive acceptance of the values and expectations of others. The directions, goals or values of other people tend to guide diffused individuals' behaviour choices. The foreclosed identity style uses social conventions of family, peers, teachers and society to guide behaviour. This style requires the willingness to conform to adult authority. It is a productive form of identity unless there is considerable disagreement between adult authorities and their belief systems. The informational identity style is associated with teenagers looking for their own answers to the personal question, "Who am I?" These teenagers explore, experience, seek and find answers for themselves. They make choices based on what fits best for themselves and their own interests, talents and opinions. These teenagers can actually say they are being their own person.

- Identity diffusion is generally an unhealthy identity. Diffusion is associated with greater risk for maladjustment, delinquency, suicide and engagement in risky health behaviours. This is because individuals tend to follow others' guidelines without considering risks or making choices that best fit their talents and interests.

- To enable adolescents to develop an optimal identity style, individuals can work with parents and other adults (e.g. teachers) to design and implement school-based or community-based parent-and-adolescent conferences for the healthy discussion of culture, identity and health. These programs and conferences might include the recognition of similarities and differences of the past, the present and the future to help teenagers discover where they are coming from in regard to their family's past, and identify where they may be going in their future identity.

- There are behavioural, emotional and physical health risks that accompany identity diffusion. Adolescents can help adults to design programs that encourage more effective and adaptive forms of identity formation through learning how to overcome obstacles and barriers, exploring effective alternatives to merely drifting through life (identity diffusion), and finding respectful ways to face differences between adolescents' life experiences and those of others.

- Adolescents can engage in non-confrontational, positive talks with parents about their future plans and recognize that most parents want their children to succeed. They can talk about ways that their family can help with gaining experiences that will enhance their future goals. If parents are unable to discuss these issues, adolescents can find other adults in their community who can help develop plans for their future.

What Communities and Governments Need to Know and Do

- The agentic (sense of personal power) qualities associated with optimal identity development include elements of self-esteem, ego strength, purpose in life and an internal locus of control. Individuals with these qualities are more active and positively self-involved in their self-construction, rather than avoiding issues or approaching life passively without considering options or seeking relevant information to make informed decisions. To assist youth, government and school officials and concerned citizens should consider the following suggestions for community development that would support optimal adolescent identity development:

- Diffused identity adolescents are at higher risk for health problems than other identity groups. Diffuse youth engage in extreme forms of behaviour to cope with meaninglessness and the absence of a sense of self. They are often alienated, ambivalent and more frequent health risk takers. These youth need direct community and health interventions and should be recognized by society as being at risk for many health problems. Reduction of the risk among diffused youth needs to be targeted through programs that promote identity development toward moratorium and identity achievement through activities

such as positive risk taking and seeking relevant information before taking action within the context of caring and supportive relationships with adults and peers.

- Foreclosed youth base their lives on imitation and identification of parents' behaviours and other adult role models. Foreclosed youth are unlikely to be at risk for major identity-related health problems, unless their parents manifest problem behaviours or their support systems break down and social conventions and norms are no longer protecting them from making individual choices. These youths are at risk if the quality of their family life is poor or threatened, religious or spiritual conventions are challenged or belief systems are compromised. These youth are likely to be responsive to adult-based health care assistance when their identity is compromised.

- Moratorium youth are often anxious because they are searching for identity structure. They are most susceptible to information, facts and knowledge during the legitimate identity crisis. These youth can experiment with risky behaviours but are open to information in prevention programs and public media regarding risk behaviour and possible costs.

- Identity-achieved youth express firm commitments for present or future roles after having been through a period of conscious choice making. Achieved-identity individuals tend to seek self-relevant information, use problem-focused coping strategies, and are more likely to effectively manage stress than the other statuses. These adolescents are less likely to engage in (or only temporarily engage in) health-risk behaviours than the other identity statuses, partially because they are less likely to be influenced by peers. Their tendency to seek self-relevant information may inhibit the likelihood of engaging in health risk behaviours if the context provides access to relevant health information.

- Canada has very few research experts on adolescence with strong methodology and statistical training in their educational backgrounds. Therefore, the following suggestions are made.

- Due to a shortage of expertise, the government should provide funding for the creation of a national centre for the study of adolescent youth. This centre would provide leadership in research on adolescence, family, school, community and health by developing a certification training program offered as an institute in various regions of the country. Thus, doctoral students in all of the allied social and behavioural, health and medical sciences could complete a three- or four-course package certifying their skills as researchers in the study of adolescent development.

- Regional research programs should be funded to study the connections between culture, parenting, identity, health and other behaviours and actions. Canada is a country comprising multiple ethnic and religious communities, and identity formation could be the organizational theme of this regional research.

- A major longitudinal project should be undertaken to study early, middle and late adolescent development in Canada. There should be a focus on the use of a sample that includes multi-ethnic groups, balance between gender and a wide range of socio-economic classes. There should be multi-methods, multi-sampling, longitudinal data with strong measurement tools designed to assess adolescent issues. These data should be used as empirical observations to guide policy formulations at the regional and national level of government.

1 Objectives

Adolescence is defined as the period of transformation from childhood to young adult status (Arnett, 2001). This transformation optimally includes the development of a strong sense of identity associated with an integration into, and positive recognition by, an adult community. Unfortunately, the importance of identity development to the immediate and long-term health of adolescents has been under-recognized with respect to the implementation of appropriate policies across various sectors. The lack of attention to identity development persists despite research findings that suggest identity formation during the adolescent and young adult years is associated with a variety of behaviour choices with implications for physical and emotional health. We submit that identity formation is a critical health issue for Canadian youth and that policy makers would benefit from using an identity framework to gain a broad perspective on health issues associated with various forms of cultural integration.

With this understood, our overall objective is to review the existing theoretical and empirical literature linking relationships between parents and adolescents, adolescent identity formation, and physical and emotional health within dimensions of cultural context. We point out both what is known, and what needs to be studied further. For example, it is clear that appropriate familial support is a critical factor in the development of a healthy identity because families provide the foundation for emotional, financial and material support for individuals as they develop. While a variety of studies have examined the associations between family relationships and adolescent identity development (e.g. Adams & Jones, 1983; Campbell, Adams, & Dobson, 1984; Bosma & Gerritts, 1985), there has been no serious analysis of this research regarding its contributions to adolescents' health. Further, parental socialization of adolescents is influenced by social and economic systems, yet consideration of cultural contexts is more often overlooked with respect to understanding their impacts on adolescent identity formation and health. Thus, the objectives of this literature review include the following: (a) to describe optimal identity development and facilitators and barriers to it, (b) to examine the role of culture, identity formation and parent/adolescent relationships in positive and negative adolescent identity outcomes, (c) to link adolescent identity development to adolescent health outcomes, and (d) to identify and delineate the relevant social and government policy implications that might promote optimal parent/adolescent relationships to support adolescent identity development and mitigate barriers to adolescent identity development.

II Literature Review

We begin our literature review with definitions and discussions of the overarching constructs critical to an understanding of parent/adolescent relationships and identity development.

1. Definitions

(a) Adolescence

Adolescence is a cultural-relative period during which the transition from child to adult status takes place (Arnett, 2001). The onset of puberty marks its beginning in most cultures, but its endpoint is highly variable from one culture to another because of different conceptions of social, economic and psychological maturity that might mark the beginning of adulthood. For the purposes of this paper in describing the situation in contemporary Canadian society, we adopt the broad view that the transition to adulthood includes both adolescence (beginning with the onset of puberty), and youth, which Statistics Canada identifies as extending to 24 years of age. It is during this period that individuals confront the identity stage (e.g. Erikson, 1968), which can include various forms of experimentation in arriving at an identity (or identities) with which to integrate into the adult world (Côté & Levine, 1987). These experiments can be of great benefit to the emotional and intellectual growth of the person (Côté, 1997), but they can also involve elements of risk, culminating in the various morbidity and mortality outcomes associated with this age period (Côté & Allahar, 1994). In addition, avoiding the tasks of identity formation can leave psychosocial development arrested or compromised, leaving the person unprepared for the complex tasks of contemporary adulthood (Côté, 2000a).

(b) Identity Status and Style

Much of the existing research literature on identity development during adolescence and youth has some foundation within, or extrapolations from, the theoretical writings of Erik H. Erikson (e.g. see Erikson, 1968). From this perspective, ego identity is a subjective sense of self-unity (being the same person across various situations) and continuity (the perception of sameness over time despite changes). A clear and firm sense of ego identity, as chief criterion of psychological health, enables individuals to explore the meaning, direction and purpose of their lives. Recent scholarly analysis and debate (e.g. Levine, 2001; Schwartz, 2001) demonstrates there is room for differences in opinion on what is the nature of "healthy identity." However, there is

scholarly consensus that a healthy ego identity involves a sense of sameness over time of **conscious (thoughtful) and reflexive self-construction** that is validated by significant others. In this respect, a strong identity is associated with personal and social competencies that are maintained by certain ego strengths. Erikson (1968) theorized that the major ego strength associated with the identity stage is a sense of fidelity; namely, the faith that one's individuality and commitments are accepted, meaningful and important to others. Recent empirical research in Canada demonstrates that advanced forms of identity formation are indeed associated with this sense of fidelity (see Adams, Ryan, & Keating, 2000).

A prolific body of research has emerged from Erikson's theory of identity formation, particularly research focused on the identity statuses developed by Marcia (1966; Marcia et al., 1993), and identity styles developed by Berzonsky (1990, 1992). Marcia (1966) proposed that Erikson's theory of identity formation can be operationalized using the dimensions of **exploration** and **commitment**: respectively, (a) the conscious (reflexive) deliberation of alternative goals, roles and values and (b) the formation of possible consolidations of these deliberations as courses of future action. The conceptual cross-tabulation of these two dimensions identifies four identity statuses: identity diffusion, identity foreclosure, identity moratorium, and identity achievement. These statuses are operationalized in terms of degrees of conscious choice making (exploration) about commitments to various domains of values and functioning. Identity diffusions exhibit low levels of past conscious choice making and little commitment to present or future roles. Identity foreclosures demonstrate low levels of past choice but high levels of future commitment. Identity moratoriums express active choice making but incompletely formed commitments; and identity achievements express firm commitments for present or future roles after having been through a period of conscious choice making.

The concept of **identity style** is a variant of identity status that places an emphasis on cognitive processes involved in identity development. Berzonsky (1990, 1992; see Schwartz, 2001, for a review) postulates three distinct identity styles representing problem-solving strategies and coping mechanisms in handling daily situations. The informational style is most adaptive because it involves the incorporation of information-seeking and active exploration. The informational style represents cognitive processes associated with the moratorium and achievement statuses (Berzonsky, 1989). The normative style represents imitation and conformity seeking, and can involve a closed-mindedness, dogmatism and the suppression of exploration (Schwartz, 2001). Because of its rigidity, the normative style represents most closely the processes associated with the foreclosure status. Finally, the diffuse/avoidant style represents procrastination and evasion of focusing on goals. The person takes a

situation-by-situation approach to life and manifests low levels of commitment and unstable self-conceptions. This identity style is exhibited most often by identity-diffused individuals.

(c) Identity Development

Human development has been described as "progressive or regressive changes in size, shape and function during the lifetime" (Magnusson, 1995, p. 20). Identity development represents the alterations in the function of ego-structure and sense of self. Changes occur in the internalization of values, goals, expectations and self-regulatory processes such that a personal sense of self-consistency emerges (Marcia, 1988). The pattern of identity development is generally progressive, beginning with diffusion and/or foreclosed, and then moratorium/achievement, although many never move beyond diffusion and foreclosure, and some individuals regress (see Waterman & Waterman, 1971; Marcia, 1976; Adams & Fitch, 1982, 1983; Waterman, 1982, 1988, 1993; Kroger, 1996). In terms of level of maturity, the four identity statuses are theorized to vary hierarchically in self-regulation and complexity of social functioning, and have been empirically associated with personality characteristics and social behaviours reflecting this hierarchy (Côté & Schwartz, in submission). Identity diffusion is generally considered the least mature and least complex status and, if it persists beyond early or middle adolescence, can be related to problems like drug abuse and academic failure. Identity foreclosure is thought to be a somewhat more mature status than identity diffusion in that some form of commitment is enacted, although foreclosed individuals tend to show low complexity, as evidenced by such tendencies as closed-mindedness and rigidity, and over-identifying with their parents. Identity moratorium is often considered a more complex status than either diffusion or foreclosure, because the individual has taken the proactive step of autonomously considering identity alternatives, but maturity can be hampered by higher levels of anxiety associated with this period of identity crisis. Identity achievement is considered the most mature and complex status, and has been empirically associated with mature interpersonal relationships and occupational success.

Berzonsky and Adams' (1999) review of literature describes the most common pattern of development as a movement from being externally controlled and lacking internalized values, goals and aspirations (diffusion) to identification with those of primary caregivers and the internalization of values and expectations resulting in a parentally determined self-structure (foreclosed). During a period of self-exploration, the parentally determined self-structure becomes less stable and there is potential for the integration of new identifications and consolidation of previous identifications (moratorium/achieved).

Changes in identity development that are associated with age are assumed to arise from several sources, including physical maturation associated with puberty, the cultural reaction to puberty signalling what behavioural changes should be undertaken, social or institutional constraints and opportunities, and maturation of ego and cognitive processes. Cognitive- developmental transitions to an abstract stage of thinking can also take place-stimulating movement to more mature forms of identity status (Grotevant, 1987; Waterman, 1992).

Social and institutional contexts influence adolescent identity development when and if they place demands on, and/or support individuals to think about, exploring options and making commitments through decision making (Kalakoski & Nurmi, 1998). These contexts can enhance adolescent identity development if they provide opportunity structures, but they can also be a barrier to development if they are unduly restrictive or do not provide resources for exploration and validation of commitment formation (Adams & Fitch, 1983). A barrier is similar to a non-modifiable risk factor (see 1d). There are some aspects of the person, such as race/ethnicity, that cannot be changed and over which the individual has no control. Social biases toward aspects or characteristics of the individual may shape social experiences (e.g. racial prejudice) that may constrain or facilitate individuals' opportunities to engage in exploration or commitment of goals, values and beliefs (Yoder, 2000).

The identity statuses can represent progressive psychosocial development. But empirical research indicates that if a person is still in a lower identity status by late adolescence, it is likely characterological and therefore a permanent adult identity status (Marcia, 1980; cf. Côté & Levine, 1987; van Hoof, 1999; Pulkkinen & Kokko, 2000; Schwartz, 2001). In fact, empirical research suggests that the identity achievement status characterizes only about 20% to 30% of adult populations in Western countries (van Hoof, 1999; Pulkkinen & Kokko, 2000), and over half of the Western adult population remain in the foreclosure or diffusion statuses (Kroger, 2000). Of particular interest in terms of the framework we discuss below, is the possible increase in the percentage of characterological moratoriums (i.e. people in continual search for commitments). Unfortunately, the research identifying these population patterns and trends are based on studies that have not used random probability samples (and we recommend that this project be given priority for future research), but there is sufficient consistency in this research to draw certain tentative conclusions.

Finally, with respect to gender differences, early studies found that for women, interpersonal aspects of identity status (Erikson's, 1968, "inner space") were more important than they were for men, and that men tended to favour vocational and ideological concerns (Erikson's "outer space"). In addition, identity foreclosure seemed to be a more "positive" option for women in terms of key personality strengths. More

recent studies have found that women have become increasingly concerned with "outer space" domains, and identity achievement is now seen as "positive" for them as it is for men (in terms of personality measures). In sociological terms, this is understandable in reference to a changing social context by which (Western) women have been granted more access to the **public domain** previously dominated by men; no longer are they as restricted to the private domain of family life (cf. Marcia, 1993, p. 39).

This does not mean that certain differences are not still observed, but rather that the identity statuses do not represent different developmental or biologically determined tasks for women and men. However, as a socialization task (preparation for integration into society), identity formation appears to differ mainly in terms of emphasis, timing and complexity, all of which are affected by cultural pressures. Women who have attempted to move into the public domain apparently find it necessary to balance issues associated with both private and public, often negotiating them with significant others as they go along. Moreover, the pattern seems to involve dealing with the private, interpersonal domain first, before moving onto public, ideological domains (Côté, 1996a). The majority of men, in contrast, seem to have been less willing to interconnect the public and private, preferring the public; when they do make links, they tend to deal with them as independent issues (Marcia, 1993). Thus, identity formation currently appears to be more complex for those women who attempt to forge both private and public identities; and as such, timing and sequencing differs from those men and women who pursue their respective traditional domains (cf. Côté, 1986a;1996a).

(d) Adolescent Health

The World Health Organization (1986) recognizes that health is more than a lack of illness and that both the individual and context contribute to a state of healthy well-being. Following from this conceptualization, Hurrelmann (1990) suggests that adolescent health is the objective and subjective state of well-being that emerges when there is synchrony between the physical, psychological and social development of individuals, their potential and current living conditions. Employing these broad definitions of health, Dougherty (1993) suggests that the indicators of adolescent health are (a) physical well-being, (b) mental health and (c) health risk behaviours. Health protective behaviours such as personal self-care (e.g. regular oral hygiene) or employment of physical safety practices (e.g. wearing a seat belt in moving automobiles, wearing a helmet when riding a bicycle) also provide indications of health status among adolescents.

Physical well-being includes the absence of long-term and communicable diseases, and musculo-skeletal trauma. Communicable diseases and musculo-skeletal trauma are salient considerations during adolescence because of the strong relationship between risk behaviour, morbidity and mortality rates during this phase of life (Joffe & Radius, 1991). Mental health comprises various psychological and social dimensions, such as a sense of autonomy, environmental mastery, potential for personal growth, positive relations with others, purpose in life and self-acceptance (Ryff, 1989; 1995; Ryff & Keyes, 1995). Certain activities are protective of both physical and mental well-being, such as physical activity and eating patterns.

Finally, health risks are a "threat to one's immediate or future health and well-being" (Schulenberg, Maggs, & Hurrelmann, 1997), and include behaviours that can contribute to morbidity and mortality. Morbidity and mortality during adolescence (versus later life) are more often related to health risk behaviours (e.g. see Adams et al., 1990; Joffe & Radius, 1991; Bingham et al., 1994). However, the same behaviours that are health risks can also provide (to varying degrees) adolescents with opportunities to experiment with new experiences that promote autonomy and independence (Chassin, Presson, & Sherman, 1989; Maggs, 1997). Thus, behaviours cannot be simply divided into normal and abnormal risks to health. They must be considered in relation to short-term and long-term outcomes (Schulenberg, Maggs, & Hurrelmann, 1997) and in relation to normal developmental tasks and acquisition of skills (College of Family Physicians of Canada, Task Force on Adolescent Health, 1993).

Adolescents' health status is influenced by social experiences that are shaped by social or cultural biases toward individual characteristics. For example, characteristics such as race or educational attainment may elicit social or cultural biases that, in turn, contribute to individuals' health status. Biases that can potentially influence health status are environmental risks or barriers that contribute to the prevalence of a health problem or disease. This is not to say that so-called barriers to optimal health status are not modifiable over a long expanse of time through socio-political change. Nonetheless, it is important to recognize that Canadian adolescents' health can be associated with structural biases. For example, gender-related patterns of stress symptoms (e.g. King, Boyce, & King, 1999) allude to environmental barriers to optimal health status.

Canadian youth do not experience equal opportunities during identity development. Therefore, some adolescents' health status is at greater risk than their peers because of multiple barriers (e.g. low socio-economic status, authoritarian parenting style, and gender) to identity development. Exposure to multiple barriers to identity development may exponentially increase the chances for compromised health status.

(e) Parent/Adolescent Relationships

The family is the major primary group within which considerable close and intimate socialization occurs. The parent/adolescent relationship is a **closed field** (see Bercheid, 1985). That is, parents and adolescents are in relationships that are non-voluntary (unlike voluntary friendships) because of legal and kinship ties. The closed-field relationship brings parents and adolescents into closer proximity and more frequent interactions than most voluntary relationships. The non-voluntary nature of the relationship also contributes to a sense of permanence and stability, despite impending changes associated with adolescents' acquisition of skills that support independent and autonomous functioning. The sense of permanence and stability emerges from the expectations resulting from repeated interactions. Interactions over time support the members of the dyad in building a set of expectations about how they interact together (Hinde & Stevenson-Hinde, 1987), including the belief that the relationship is long-term and, therefore, has an enduring future (Lollis & Kuczynnksi, 1997). The notion that the relationship has a future is evident in parents' establishment of long-term socialization goals (e.g. Kuczynski, 1984) and efforts by parents and adolescents to preserve the quality of the relationship (Lollis & Kuczynnksi, 1997).

Parenting of adolescents is different from the parent/adolescent relationship. **Parenting** is the process or state of being a parent (Brooks, 1991). Darling and Steinberg (1993) suggest that **parenting style** is a "constellation of attitudes towards the child that are communicated to the child and create an emotional climate in which the parent's behaviours are expressed" (p. 493), while the "behaviours defined by specific content and socialization goals" (e.g. attending school functions) are **parenting practices** (p. 492). Parenting styles influence adolescents indirectly because the styles shape the nature of parent/child interaction. Complex ecological models of family relationships are now widely suggested, where family environments are proposed to influence parenting attitudes and attitudes are thought to predict behaviours that ultimately link to adolescents' development and behaviour (e.g. see Ryan & Adams, 1995).

2. *Identity Formation and Health*

(a) Diffused Identity

There is ample evidence to suggest that the emotional health of identity-diffused adolescents is poor in relation to the other identity statuses. Research on adolescents and youth with this type of identity status indicates that diffuse adolescents are more likely to engage in fad behaviours, have fewer deep or intimate relationships, and report more feelings of inferiority, alienation and ambivalence about life (e.g. see Gullotta,

Adams, & Markstrom, 2000). Individuals with a diffuse/avoidant identity style are likely to also report higher levels of depression, lower self-esteem and debilitating anxiety reactions (Berzonsky, 1994).

Identity-diffused adolescents tend to be at higher risk of engaging in health-risk behaviours than the other statuses. Identity diffusions tend to use less effective coping strategies because they are prone to employing avoidance strategies under stress (Berzonsky, 1992). Their procrastination or reluctance to deal with decisions results in reliance upon situational demands rather than self-determined actions. A tendency to conform to external demands (Marcia et al., 1993; Marcia, 1994;) renders diffused individuals more easily influenced by peer pressure (Adams, Ryan, Hoffman, Dobson, & Nielsen, 1985). While peer pressure does not always result in negative outcomes, diffused adolescents have fewer resources to resist provocation from peers to engage in deviant or antisocial behaviours that include health risks. They are more likely to report use of alcohol (Jones & Hartmann, 1988; Jones, Akers, & White, 1994; Bishop et al., 1997), illicit drugs and cigarettes (Jones & Hartmann, 1988; Jones, Akers, & White, 1994) than other statuses. Diffused identity women may be prone to bulimic behaviour as a means of avoiding distress associated with threats to identity formation (Wheeler, Adams, & Keating, 2001). Recent research findings (Adams et al., 2001) with a sample of approximately 2,000 high school students indicate that high scores on identity diffusion predict higher levels of conduct disorders and hyperactivity and more involvement in delinquent behaviours — including alcohol and drug abuse, property crimes and violence. This is in contrast to the other identity statuses which reflect lower levels of maladjustment or delinquency.

(b) Foreclosed Identity

Foreclosed identity adolescents generally manifest adequate mental health. If these youth remain in the context in which they foreclosed, or if the context does not introduce dramatic changes or uncertainty, they are likely to experience high levels of well-being (Marcia, 1994; Meeus et al., 1999). These youths are likeable and cooperative. However, while foreclosed youth tend to repress and deny their feelings, live quiet and orderly lives, and endorse the power of authority, they tend to require substantial social approval and conformity, and engage in stereotypic impression management (Bosma & Gerritts, 1985). These youth often live a productive and smooth adult life. However, certain characteristics place these youth at risk for mental health problems if they encounter unpredictable change, environmental demands or sudden change in stressors. Change and uncertainty in their social and personal lives can create substantial identity confusion for the foreclosed individual (Adams & Ethier, 1999).

Foreclosed adolescents who demonstrate more social skills and competencies are less at risk for health-compromising behaviours than diffused youth. In addition, they are apt to seek social support to handle crises and anxiety-inducing situations. Unfortunately, they may also tend to employ wishful thinking when facing a crisis (Berzonsky, 1990) and may, therefore, not be equipped to adjust if the context changes (Marcia, 1994) or if the situation is ambiguous (Berzonsky, 1998).

(c) Moratorium/Achieved Identity

Adolescents who exhibit the transitional status (moratorium) or identity achievement status, especially if they employ an informational style, are likely to experience higher levels of mental well-being and demonstrate more resistance to health-risk behaviours. They generally appear to have strong relationships with family and friends, manifest self-efficacy, and are more reflective and self-confident (Marcia et al., 1993). Their internal self-regulation helps to ensure that their self-esteem is not easily manipulated by external demands (Marcia, 1994). Moratorium/achieved identity individuals tend to seek self-relevant information and use problem-focused coping strategies (Berzonsky, 1992), suggesting that they are more likely to effectively manage stress than the other statuses. Moratorium/achieved adolescents are less likely to engage in (or only temporarily engage in) health-risk behaviours than the other identity statuses, in part because they are not influenced readily by peers. In addition, their tendency to seek self-relevant information may inhibit the likelihood of engaging in health-risk behaviours if the context provides access to relevant health information. For example, identity-achieved and moratorium youths are more likely than foreclosed or diffused youth to express health concerns about using alcohol or psychoactive substances (Christopherson, Jones, & Sales, 1988).

Moratorium adolescents report higher levels of anxiety while they are exploring alternatives prior to consolidation of commitments (Marcia, 1994). This anxiety appears to be manageable and within levels of reasonable coping for the majority of moratorium youth. However, individuals who are not socially supported in making the transition to achieved-identity status may be at slight risk for health problems during engagement in the exploratory process. No research has been carried out on the health risks for characterological moratoriums, either in adolescence or during adulthood, although we would assume that they might be closer to those of diffused rather than achieved youth.

(d) Identity Transitions and Health

Identity development involves the transition from one identity status to another. According to the identity status literature, optimal development involves moving from compliant and passive statuses (diffusion and to a lesser degree foreclosure) toward

more agentic or self-directed statuses (moratorium/achieved). In this sense, the more mature statuses are considered to be protective of health risks in certain respects (e.g. Adams et al., 2001). However, while developmental transformations afford the opportunity for maturational gains, they can also place individuals at risk during transitional periods if protective social support factors are not in place to ensure adequate resolution of the transition. In general, however, progressive transitions in identity formation (movement from passive forms of identity to agentic forms) have been found to result in increased psychological well-being, while regressive transitions decrease psychological well-being (Meeus et al., 1999). Further, when development is slow or delayed there is a greater likelihood of lower psychological well-being (Meeus et al., 1999). These patterns suggest that developmental regression or off-time (late) development may place youth at greater risk for mental health problems.

Transitions from one identity status to another involve functional changes of the ego- and self-structure. Developmentally, earlier adaptive strategies and identifications will be discarded during the progression to alternative self-regulatory processes. While identity status transitions may not, in themselves, lead to health problems, any changes in ego functioning can be associated with distress. This is especially true with movement through the moratorium status, where greater levels of anxiety have been consistently reported (Marcia, 1994). This anxiety may emerge from discarding previously adaptive strategies and incorporating new ego processes. Whether this leads to risk taking depends on the social support mechanisms in place.

If individuals fail to adequately make transitions, they may discard one set of skills and identifications before fully adopting the new way of being, placing them at greater risk for mental health problems. Chandler (1994) has studied the transitions in identity strategies that facilitate individuals' sense of continuity over time, a core aspect of identity (see B.1.b). He suggests that failed transitions may give rise to mental health problems because adolescents lose the cognitive ability to consider themselves as continuous beings with a past, present and future (self-continuity or historical stability). For example, Chandler (1994) has found that the inability to temporally connect oneself, or determine a continuous sense of self from the past to the future, is associated with risk for suicide.

In this context, Baumeister, Shapiro and Tice (1985) suggest that there are two kinds of identity crises that are associated with transformations in identity: the "crisis of legitimacy" and the "crisis of motivation". The legitimacy crisis, or identity conflict, is the product of multiple aspects of the self and incompatible commitments that need reconciliation. The underpinning force is inconsistency between a person's self-recognition of goals or values. In contrast, a motivation crisis, or identity deficit, is characterized by an inadequately defined self-identity (diffused) that lacks

commitments, goals or values from which to base decisions, actions or choices. The motivation crisis emerges when a person lacking guiding commitments struggles to make such commitments. The authors speculate that a legitimacy crisis results from situational demands that call for reconciliation. A motivation crisis is more likely to be produced by factors associated with the normal development of a maturing person.

Baumeister and co-workers' work is helpful in understanding coping strategies in resolving identity crises in contemporary societies. It appears that many young people follow a trajectory into adulthood of "default individualization" (as with identity diffusion), while others choose a trajectory of "developmental individualization" (as with moratorium and identity achievement). Default individualization simply involves taking the paths of least resistance and effort when approaching major life challenges, while developmental individualization involves actively undertaking more difficult growth and learning experiences (Côté, 2000a). In developing policies, developmental individualization needs to be targeted for investigation and we need to know how aspects of parent/child relations can enhance it. For example, we need to appreciate how differing parenting practices and styles encourage one form of individualization over the other and which practices set the stage for a particular type of identity formation (e.g. identity diffusion rather than identity achievement)

Identity development that involves transitions from the less to more mature identity statuses and styles, and from default to developmental individualization, constitutes a protective factor in and of itself to the extent that adolescents become more self-regulating, agentic, growth conscious and information seeking. If social and institutional contexts encourage this, and provide the support and resources for the transition, we can assume that adolescents will engage in fewer impulse-oriented and peer-induced risk behaviours (e.g. unsafe sex) and be less likely to adopt a life style in which risk behaviours are an integral part (e.g. drug and alcohol abuse).

3. *Aspects of Context: Parent/Adolescent Relations, Identity, and Health*

Parents are only one source of influence on the developing adolescent in contemporary Canadian society. Indeed, in contrast with most of human history, parents must now compete with a myriad of other influences to have discernible effects on the growth and development of their children. In this section, we examine these competing influences, grouped into four general categories: socio-historic conditions, socio-economic factors, cultural background and social institutions.

(a) Socio-historical Conditions

Margaret Mead, perhaps the best-known anthropologist of the 20th century, laid out a theory of how socio-historical change affects relations between generations in her book *Culture and Commitment: A Study of the Generation Gap* (1970). In it she explores the idea that parent/child relationships vary significantly in terms of three stages in the evolution of intergenerational relations that she referred to as postfigurative, cofigurative and prefigurative. This significant text was written after decades of research in a wide variety of non-Western cultures. In her work, Mead presents a theory of "culture and commitment" that encapsulates her insights into how various changes have affected intergenerational relationships. Among other changes, she explores the cultural differences in (a) the norms of parenting, (b) obligations and commitments between generations and (c) day-to-day relations between children and adults (essentially around the idea of what parents **demand** of their children and vice versa, as below in section 4. (a).

In postfigurative cultures, the relations between parents and their children are governed by traditional norms that are beyond questioning by either parent or child. Child-disciplining practices are long established and not open to discussion. A postfigurative culture is often stabilized by the co-residence of three generations of the family and the assignment of most social roles. Consequently, changes in parenting behaviours and attitudes are slow, there is a high level of intergenerational continuity, and identities are ascribed (given); so issues of identity formation tend not to arise, or if they do, they are not seriously entertained. Postfigurative cultures are mainly pre-modern, pre-industrial societies with tribal, feudal or agrarian forms of social organization and economy; namely, what sociologists refer to as traditional (Gemeinschaft) societies (versus modern, Gesellschaft societies).

In cofigurative cultures, the intergenerational linkage becomes tenuous because of social change brought on by technological advancement, economic transformation, immigration, war, and so forth. One or more of these forces affects the culture, giving children a different set of experiences than their parents had, if only for a brief time. Consequently, the young may look to sources of meaning and identity not available from their parents, particularly from among their contemporaries. Thus, there is a fundamental change in the relations between parents and children, whereby the authority of the parent can be questioned and the child can actually give direction to the parent in certain instances. As a result, the eventual adult roles assumed by children as they mature are no longer taken for granted by either parent or child. Nonetheless, the schism between parent and child is limited because children are obliged to observe and respect significant elements of the culture shared with their parents.

Prefigurative cultures are characterized by the rapid and massive social change characteristic of post-industrial countries around the world. Because of the extent of social change, parents may have little conception or vague notions of what the future holds for their children, so their past life experiences are of little use to their children with respect to their sense of present meaning and future roles. To the extent that there is awareness of the future, parental guidance may not be well regarded by children. Moreover, some parents' self-constructed belief systems may be dismissed by their children as invalid. In fact, children can see their parents as out of touch with new social and technological developments. Therefore, Mead argued that in prefigurative cultures the young could actually teach their parents about the ongoing social and technological changes, or achieve a level of social status, to the point where their parents can become subservient to them in various ways. Hence, the break in tradition-bound relations between parents and children that began in the cofigurative culture is widened in the prefigurative one to the point where parents have the licence to be permissive with their children and their children have the latitude to be dismissive of their parents.

Mead's typology, like other classification systems used for theoretical purposes in the social sciences, is adopted to guide the analysis of investigations through what otherwise could be a maze of information. In using such taxonomies, social scientists deal with "ideal types" (which in reality include a range of behaviours) in much the way that psychiatrists use diagnostic categories: it is rare for an actual case to exhibit all of the criteria, but the diagnostic categories are useful nonetheless. Thus, we can use these categories to direct us, but we should not get sidetracked from our overall goal of characterizing complex situations by exceptions and individual variations. Believing that exceptions and variations invalidate these forms of generalization is referred to as the "individualistic fallacy" or what Erikson (1968) referred to as "mis-specification." Mead's work is used here to help place parenting practices in a historical and cross-cultural context to understand better the role of, and recourse to, authority in parenting.

Traditionally, parental authority was protected by cultural norms in Canada. Parents did not normally develop their own disciplinary practices, nor did they need to justify them to their children or to the law, in some cases. Thus, the extent to which children socialized their parents was far less in postfigurative than in prefigurative societies, where this is now tolerated and encouraged. The "individualization of parenting" thus creates new demands and challenges that we need to understand, especially given that identity formation processes are also affected by individualization factors.

Mead saw much that was positive in prefigurative societies. However, it would appear that many hazards are associated with a society in which the parents experience great difficulties in guiding their children into adulthood. For example, identity problems can become so common as to be considered normal (e.g. identity diffusion). At the same time, Mead's theory sheds light on a number of issues. For example, in countries like Canada, the health and well-being of current and future generations of children are becoming divorced from past parenting practices, yet there is widespread confusion about how to effectively raise children and relate to adolescents. Moreover, among the public there seems to be little awareness of what the future holds for children and adolescents brought up in prefigurative environments where behaviour is less constrained in a variety of social contexts.

When viewed in the context of Mead's theory of changing intergenerational relations and the emergence of prefigurative culture, there is some urgency in Canadian society for developing the means of informing parents how to cope with their adolescent children, and to help their children cope with these conditions. Indeed, there appear to be increased health risks to young Canadians associated with growing up in a prefigurative culture. Côté and Allahar (1994) identify a number of "liabilities of youth" that have increased over the past several decades. These include mortality and morbidity factors such as increased suicide rates (a fivefold increase between 1961 and 1981) and greater psychiatric problems, especially depression (an estimated tenfold increase over the 20th century). In addition, significant proportions of young Canadians now engage in certain risk activities in greater proportion than previous generations, especially generations from the first part of the 20th century. These include drug use, violent crimes and dangerous use of automobiles. While it appears that many of these health risks have reached a plateau over the past decade or so, they are still of considerable concern to adult society given their historically high levels.

In reference to America, Lerner (2000) notes that "50 percent of American youth engage in two or more of the four major categories of risk behaviours (crime and violence; substance use and abuse; unsafe sex and teenage pregnancy and parenting; and school failure) and that 10 percent engage in all four sets." These risk behaviours are often accompanied by a lack of integration into mainstream society in general, and adult society in particular. Moreover, the more these risk behaviours are engaged in, the more difficult transition to adulthood can be. Thus, the implications of social mal-integration for identity formation are clear — the less socially integrated the individual, the more difficult it is to formulate a positive identity rooted in a stable community of others. Further, the more likely it is that the individual will follow a **default individualization** trajectory; and the more likely it is the person is not gaining the type of identity resources (capital) that will see them into a productive adulthood.

Some sociologists explain the increased mortality and morbidity among young people in terms of the individualization process associated with the emergence of prefigurative-type societies (e.g. Beck, 1992). Consistent with Mead's theory, some sociologists have argued that in the latter part of the 20th century, Western societies experienced a decline in social cohesion and collective orientation of communities and their constituent families. This has led to a decoupling of certain life-course transitions, leaving young people increasingly on their own in terms of making major life decisions and transitions (Côté, 2000a). Now, young people face making the transition to adulthood with less guidance and certainty than past generations, and this transition can now take far longer to complete.

Within this context, families can be viewed along a spectrum in terms of how supportive, guiding and nurturing they are in helping young people come of age ("responsiveness," as below in section 4. (a). Some parents have been able to help their children develop their psychosocial potentials and prepare them for the individualization process while many seem lost or indifferent to the challenges their adolescents face.

Mead's theory of culture and commitment directly links with Erik Erikson's theory of identity formation (Côté, 2000a). In postfigurative societies, social identities tend to be **ascribed**. In other words, ready-made identities are assigned mainly on the basis of inherited statuses. Youth are most likely to become foreclosed in their identity. In cofigurative societies experiencing industrialization and the rise of the nuclear family, adult social identities can increasingly be **accomplished**, ostensibly based on a person's efforts, skills and achievements, independent of their inherited statuses. Thus, youth are more likely to experience a moratorium of exploration and choice making, and make the developmental transition toward identity achievement. And, in prefigurative societies, it appears that adult social identities are increasingly in need of being **managed**. That is, people's inherited characteristics and prior accomplishments can carry little weight in giving them legitimacy in a wide variety of new social settings (although the obstacles associated with class, gender and race can still be encountered in significant ways). Instead, people increasingly need to strategically guide and control their own actions to continually fit themselves into a community of "strangers" (people who do not know their life history) by meeting their approval through the creation of the right impressions (Côté, 2000a). The wrong impression management can lead to a loss of legitimacy and even censure in the minds of late-modern citizens who tend to judge character in terms of the concrete behaviours they witness. In this case, the presentation of situationally appropriate behaviours may be more important than attainment of a stable identity, and a diffuse (or possibly a characterological moratorium) identity may be the most likely form of self-development.

In understanding the relevance of socio-historical factors for parent/adolescent relations, identity and health issues, we need to be mindful of the overall weakening of social and economic supports for identity formation processes in Canadian society. That is, institutional supports for making developmental transformations of the self have been destructured and are often deficient (i.e., they have broken down or are seriously deficient — such as the linkages between the educational and occupational systems; Côté, 2000a; Côté & Levine, 2002). Consequently, in contrast with traditional societies, individuals are left largely on their own in terms of making the transition to adulthood and managing their subsequent life courses, especially in terms of setting and achieving goals. In prefigurative-leaning societies like Canada, developing and sustaining stable, internal points of reference can be problematic for all individuals, but particularly so for adolescents. Thus, one barrier to optimal identity formation may be the decline of institutional supports for life transitions such as the passage from childhood to adulthood. Accordingly, more than ever we need an understanding of how to develop the means of establishing protective and nurturant mechanisms for adolescent identity formation. We might also add that immigrant children coming from homelands with a strong postfigurative culture that promotes a foreclosed identity may have serious struggles in cofigurative society.

The connections drawn between Mead and Erikson help us understand how to link the identity status paradigm with Mead's socio-historical framework. In postfigurative societies, where adult social identities are ascribed, identity foreclosure likely predominates as a functionally adaptive developmental stance toward forming an adult identity. In cofigurative societies, where adult social identity is ostensibly accomplished through individual effort, identity achievement would be the developmental strategy that appears most encouraged by the social organization and beneficial for the individual. For prefigurative societies, where social identities in adulthood need to be continually managed, identity diffusion and characterological moratorium appear to be increasingly the predominant response because long-term commitments seem to be more difficult to sustain. However, unlike the predominant patterns in the previous two types of societies, the diffusion stance may be "socially adaptive" as a conformity strategy in the same way that default individualization is, but not ultimately beneficial for the individual, or the society. In other words, we are not recommending the diffusion stance as an adaptive strategy; rather, we are trying to describe what may be an influence in the lives of many contemporary adolescents. Finally, it must be stressed that all types of identity formation should be possible in each culture, but there is sufficient reason to predict a "culture-identity match" along the line specified above (see Côté, 2000a).

(b) Socio-economic Factors

Identity formation can be affected in terms of both the social class background of parents and the economic conditions faced during adolescence and the transition to adulthood. Both of these affect the resources that are relevant to the range of potential socialization experiences constituting the transition to adulthood. Less wealthy parents have fewer resources that would afford their children educational, travel and work experiences that can provide the basis of extensive exploration of their abilities and the options available in the wider society. Accordingly, adolescents from lower socio-economic backgrounds generally have fewer opportunities for prolonged forms of experimentation and exploration of alternative roles and values than adolescents from higher socio-economic backgrounds. We would expect, therefore, more direct movement into adult roles among the less wealthy, and a more protracted period of identity formation among more affluent adolescents (Côté, 2000b). Indeed, many youth who are minorities in their communities and who are poor are likely to be — and remain — foreclosed (see Markstrom-Adams & Adams, 1995).

At the same time, the economic prospects of the youth segment of Canadian society have declined over the past quarter-century, as we have moved further into a post-industrial society characterized by a large service sector (Côté & Allahar, 1994). Adolescents can find employment mainly in the subordinate service sector where pay is low and prospects for advancement few. Those in their twenties have more opportunities, but face salaries that often do not provide a living wage (about 30% lower than in the 1960s). Consequently, 66% of those in their early twenties live with their parents, while 30% to 40% of those in their late twenties do so. Those who graduate from college and university fare the best in terms of wages and employment levels. But those who do not (who are more likely to be from the lower socio-economic brackets) find low wage levels and high unemployment (between 12% and 20%, and generally three to four times the adult level); (Côté & Allahar, 1994).

As noted above, the health-risk factors among young Canadians increased over the same period that economic prospects declined. This is perhaps associated with the longer period of time now taken to move into adulthood. Being kept in a state of "immaturity" longer is a risk factor that may breed forms of immaturity associated with risk seeking (e.g. drinking and driving) and unwise social behaviours (e.g. unprotected sex). Thus, the changes in employment sectors and the decline of economic prospects have given rise to potential barriers to optimal identity formation. These conditions in turn place various challenges and stresses on parent/adolescent relations that can be difficult for all parties to cope with.

In understanding socio-economic factors, we need to be mindful of the fact that parents may be limited in the resources and opportunities they can provide their children, as well as the limitations many young people now face in making the transition to adulthood. Moreover, many young persons would like to get on with their adult lives but do not have the economic means to do so. Within this context, we need to understand how parenting practices can mitigate the identity formation problems and risk behaviours associated with various socio-economic circumstances.

(c) Cultural Background

Canadian society is made up of families from an array of cultural backgrounds. These differences can be understood in terms of Mead's model of intergenerational relations. Parents whose identities are rooted in more traditional cultures that emphasize a continuity and respect among generations of extended families, give their children different socialization experiences than parents with few links to a traditional culture or an extended family. In understanding cultural factors, therefore, we need to be sensitive to the variations in expectations parents bring with them from their own upbringing and the experiences their children have in Canadian society, with its liberal culture and the emotional entitlements it offers the young.

Some of the risk behaviours that may be associated with these socialization experiences might include forms of impulsive rebellion from parents whose cultural background is incongruous with the liberal environment their children are exposed to in Canada, especially when the child finally leaves home, as in the transition to college. These adolescents may be unprepared for the social and sexual behaviours they witness among their peers, including binge drinking and unprotected sex. At the same time, parents who resist the pressure to be permissive, and their children who ignore the elements of prefigurative society discussed above, may be engaging in protective health behaviours by doing better in school and resisting peer pressures to experiment with drugs, alcohol and unsafe sex.

(d) Social Institutions

Young Canadians are heavily influenced by a matrix of institutions outside the family. In fact, most young Canadians spend far more time in schools, at work and consuming mass media than they do with their parents (Côté, 2000a). Many parents feel overwhelmed in guiding their children through these experiences, sometimes because they themselves spend most of their time outside the family in work-related activities and/or they do not monitor the fast-changing popular culture that sets trends for adolescent activities. In place of parental involvement, the mass media, in particular, seem to have become manipulative of the identity formation process of adolescents.

Marketers now have an array of sophisticated techniques to sell a wide range of products and services to youth, especially through the mass media. This focus of immediate material interests can distract youth away from their long-term goals and interests. Of particular concern is the "intensification of gender" that these media can promote. Gender intensification can push young people toward traditional gender roles at a time when many parents and schools are trying to convince young people to consider a range of non-sex-typed options for their own lives (Côté & Allahar, 1994).

Heavy consumption of the media has been associated with imitative behaviour like copy-cat risk taking (of stunts from movies targeting teens, like lying in the middle of the road) and acceptance of dating violence (among heavy music video viewers, including females); (Côté & Allahar, 1994). The media can also have indirect effects through peer groups. When peer groups identify with, and endorse, certain behaviours glorified in the media, adolescents who find it difficult to resist peer pressure (like diffusions) may be prone to drug use and binge drinking. Finally, eating disorders have been linked with the impact of advertising on the self-concepts and self-esteem of young women (Levine, Smolak, & Hayden, 1994).

In some communities, social institutions are working in concert to create a community of structure that offers a message of care. Ianni (1989) has identified the key elements to a successful transition between adolescence and adulthood through the concept of a youth charter. Communities that provide youth charters have a coordinated set of expectations and standards which allow young citizens a place to develop in a caring community. According to Ianni (1989, p. 264) "it is through the youth charter that teenagers can become active constructive participants in getting to know themselves, their social worlds, and who they are and can become within them ... within the various community institutions and environments, adolescents can observe the interacting effects of their actions and the actions of others, and thus evaluate and modify their own behaviour in response to the judgements of others ... the charter provides the source of feedback about who one is and how one is doing as the individual develops a set of self-evaluations as a son or a daughter, a student, and a friend." Such community initiatives should provide the contextual support necessary for the types of positive identity transitions discussed above.

We should be cognizant of such influences and look for ways in which parents can help their adolescent children benefit from, rather than be stymied by, these social-institutional experiences during their identity formation. Namely, we should help adolescents to learn how to make the most of their educational opportunities, how to use work experiences as part of a long-range plan to achieve adult independence in a viable career path, how to consume the mass media in an informed and mature manner, and to resist the impulse to imitate, directly or indirectly, media-endorsed behaviours.

4. Parent/Adolescent Relationships and Identity Development

(a) Conceptual and Theoretical Frameworks

By far, the most popular framework for understanding parent/adolescent relationships is the parenting style model initially proposed by Baumrind (1968). Maccoby and Martin (1983) later extended Baumrind's initial typology by defining parenting styles in terms of two underlying dimensions: demandingness and responsiveness. **Demandingness** refers to parents' expectations about their children's behaviour and maturity and the parents' demands for their children to comply with them. **Responsiveness** is parents' sensitivity to their children's signals, needs, and states. Using the two dimensions in juxtaposition, four styles were proposed based on a cross-tabulation of high and low demandingness and responsiveness. The **authoritative** style is high on both responsiveness and demandingness. The **authoritarian** style exhibits high demandingness but low responsiveness. The **indulgent** style, in contrast, is low on demandingness but high on responsiveness. And the **indifferent** style is low on both responsiveness and demandingness. These last two styles constitute permissive styles of parenting.

Parenting styles are global characterizations of beliefs, attitudes and behaviours and do not directly account for contextual variations (e.g. culture). Parents' styles and practices vary depending on their views of authority and their children's transgressions. Furthermore, authority over children and youth varies according to cultural standards of what is public and what is private (Nucci, 1994; Smetana, 1994). In postfigurative societies where intergenerational continuity is important and identity (including family identity) is ascribed, the family enforces community standards through close supervision of all members to ensure the creation and maintenance of the family reputation (see Kett, 1977; Nock, 1998). In cofigurative and prefigurative societies, family supervision is more relaxed as there is less focus on the transmission of an ascribed identity through family reputation and more emphasis on individual creation and maintenance of personal reputation (Nock, 1998). Parental and community authority over adolescents' behaviours is likely more pervasive in postfigurative than in cofigurative and prefigurative societies.

Parents' views of their authority over adolescents' behaviours are associated with parenting style. Smetana (1994) investigated parents' views about their jurisdiction over their adolescents' behaviour and found that authoritarian parents endorse more rules over more domains (e.g. personal, moral) than parents employing the other styles. Authoritarian parents seem to be less able than other parents to adjust their sense of obligation about rules between domains. In contrast, permissive parents feel less obliged to make rules across all domains, leaving the adolescent with jurisdiction over a

number of domains, including safety issues. Authoritative parents tend to balance the establishment of rules by allowing adolescents appropriate privacy but providing firm and consistent guidelines for behaviour (Steinberg et al., 1989; Barber, 1996), and developmentally appropriate expectations (Maccoby & Martin, 1983) such as allowing adolescents jurisdiction over appropriate domains (Smetana, 1994).

Parenting style and beliefs about authority over children influence how parents support their adolescents' development of autonomy. Authoritative and permissive parents tend to encourage and permit their adolescents to develop their own opinions and beliefs, a strategy called psychological autonomy granting (Steinberg, Elman, & Mounts, 1989; Ginsburg & Bronstein, 1993). Permissive parents differ from authoritative parents because the former do not require mature behaviour from their adolescents. The converse of psychological autonomy, psychological control, is a strategy that authoritarian parents tend to employ, and is experienced by the adolescent as intrusive and coercive (Barber, 1996). The degree to which parents grant psychological autonomy has implications for identity development.

As noted above, underlying the development of identity are two processes, exploration and commitment. Adolescents who are provided with opportunities to develop their own beliefs and opinions are facilitated in their exploration of alternatives and commitment to a set of beliefs. Authoritarian parents' views about rules and lack of flexibility in giving their children jurisdiction over issues may reduce adolescents' perception of the legitimacy of exploring options that enhance identity formation. We would expect that adolescents socialized by authoritarian parents would struggle to establish a sense of uniqueness that is fundamental to identity development. Conversely, permissive (either indulgent or neglectful) parents allow their children authority over several domains, and their adolescents may struggle to discern how to make appropriate decisions. With so little guidance, these youth may flounder during decision making about critical health and moral issues. In addition, these individuals may experience difficulties establishing commitments that help form a clear sense of identity. Authoritative parenting should provide an adequate balance of support and structure to guide adolescents' opportunities to explore options and establish commitments to values and beliefs.

Parental authoritativeness has a cumulative effect. It is better to have one authoritative parent than none. Research shows that the authoritatively inclined tend to marry each other resulting in mothers and fathers being in agreement about 75% of the time concerning authoritative issues (see Steinberg, 2001). The benefits of authoritativeness also seem to expand beyond the family — adolescents also benefit from having authoritative, versus permissive teachers, school principals, coaches, and bosses.

Steinberg (2001) argues that authoritative parenting has benefits that cross the boundaries of ethnicity, socio-economic status and household composition. In examining the relevance of authoritative parenting among minority groups in the United States, research indicates that although African-American and Asian-American adolescents are not as harmed as white adolescents by authoritarian parenting, minority youngsters raised by authoritative parents do better than their peers from non-authoritative homes in terms of psychosocial development, symptoms of internalized distress and problem behaviour. Although most of the research has been carried out on American samples, Steinberg concludes that regardless of racial or social background, or family composition, adolescents have more positive outcomes when exposed to authoritative parenting. Moreover, research carried out in other countries, with a range of value systems (China, Pakistan, Hong Kong, Scotland, Australia and Argentina), supports the cross-cultural validity of the beneficial impact of authoritative parenting, although it may take different forms in non-Western cultures (Arnett, 2001).

It needs to be stressed that, like all theoretical models, the real-life situations parents face may be quite different and complex than the parenting styles model suggests. Day-to-day life involves a give-and-take, especially in cofigurative and prefigurative societies, where there is more of a reciprocal effect between the parent and the adolescent (Arnett, 2001). In contrast to young children, adolescents are more agentic; therefore, consideration should be given to their role in shaping the relationship with their parents, including responses to outside influences from their peers, the school and the mass media (Kuczynski, Marshall, & Schell, 1997) and their intentional self-development (see Brandtstädter & Lerner, 1999). Taken together, the thoughts and behaviours that adolescents bring into interactions with their parents can make authoritative parenting quite difficult. To cite an extreme example, trying to authoritatively reason with an adolescent who (temporarily or persistently) is willful, aggressive or withdrawn may be fruitless simply because that adolescent may not be open to reasoning and discussion, and cannot handle psychological autonomy.

The notion of goodness-of-fit (Chess & Thomas, 1989) is helpful in understanding the link between parenting style and adolescent development. Congruence between parenting style and adolescent identity status may support parents'effectiveness whereas lack of "fit" may impede parents' efforts. For example, an authoritative parent may encounter difficulties interacting with a child experiencing a high level of identity diffusion because reasoning or support may not work to direct the adolescent's energies. In contrast, an authoritative parent would likely find a comfortable relationship with an adolescent undertaking a developmental individualization process involving identity moratorium on an identity achievement trajectory.

Finally, we offer the following model to help integrate the literature on social context, identity formation and parenting styles. Figure 1 presents Mead's theory of culture and commitment as a context within which to understand the mediating influence that parenting styles can play in identity formation. We caution at the onset that it is also likely one can find instances of each parenting style and identity formation outcome in each of Mead's three societies. However, each society would be more likely to give rise to one particular parenting style (making that style dominant in the culture), and that parenting style would constitute a mediating vehicle of transmission in nurturing a particular identity formation outcome. Accordingly, postfigurative societies should be more likely to require an authoritarian parenting style, which in turn encourages identity foreclosure outcomes. Cofigurative societies should facilitate the use of authoritative styles, which in turn should give rise to the moratorium and achievement outcomes. Prefigurative societies would be more likely to give rise to permissive styles, which in turn produce more identity diffusion and (characterological) moratorium, although other outcomes occur (e.g. identity achievement) among those who resist the deleterious influences of prefigurative culture. Indeed, one of our basic recommendations is that Canadian parents resist the deleterious aspects of prefigurative culture and teach their adolescent children how to do so as well. Finally, it must be noted that these parenting styles may look different in different cultures, but to the extent that demandingness and responsiveness are potential parenting responses that vary by degree, we should find evidence of them, and the types of parenting associated with them, in various cultural contexts for example, authoritative parenting may be found in strictly postfigurative societies, and is referred to as the "traditional parenting style" by Baumrind (1987), but authoritarian parenting should be more common, if the theory holds).

Figure 1: Interrelationships Among Context Factors, Parenting Styles, and Identity Formation Outcome.

Cultures	→	Postfigurative	Cofigurative	Prefigurative
		↓	↓	↓
Appropriate Parenting Styles	→	Authoritarian	Authoritative	Permissive
		↓	↓	↓
Identity Formation Outcomes	→	Foreclosure	Moratorium/ Achievement	Diffusion/ Moratorium

(b) Research Linking Identity Status, Parenting Styles and Parenting Practices

In reviewing empirical literature, we find that few published studies directly investigate relations between the global notion of identity status and parenting styles. This may reflect, among other things, a lack of interest in such relations, over-specialization in certain fields or competition among specialties. Or it may be a result of journal publication practices whereby only significant findings are normally published (hence, studies finding no statistically significant relations tend not to be submitted for publication or actually published if they are submitted). Steinberg (personal communication, April 5, 2001) thinks that the inattention to this area is because early and mid-adolescents have been targeted by parenting style researchers, while changes in identity domains are not apparent for most people until late adolescence.

In view of so little research directly linking parenting styles and identity formation, we discuss the literature by extrapolating from studies incorporating parenting practices that are associated with parenting styles. Our reason for integrating this literature is to look for promising areas of future research on which to base policy recommendations.

Parental responsiveness and demandingness, the dynamics underlying parenting styles, have been associated with identity formation. Responsiveness, assessed as parental warmth and support (Adams & Jones, 1983; Jackson, Dunham, & Kidwell, 1990), and parental encouragement and companionship (Adams, 1985), is positively associated with the moratorium or identity achievement statuses. High levels of responsiveness do not compromise adolescents' development except if the warmth and support lead to enmeshment (extreme emotional closeness) with others. Researchers (Cooper Grotevant, & Condon, 1983; Dyk, 1990) have found that identity exploration is inhibited under conditions of parent/adolescent enmeshment. Moderate demandingness or democratic paternal parenting (Lee, Kobayashi & Adams, 1988) enhances identity exploration while excessive parental attempts to control adolescent behaviours can discourage identity explorations (Bosma & Gerritts, 1985).

With respect to identity styles, Berzonsky and Kinney (1998) found that late adolescents who are informationally oriented tend to report their parents' style as more authoritative, with normatively oriented adolescents seeing their parents as more authoritarian in nature. Moreover, the diffuse/avoidant style is positively associated with the perception that their parents are either permissive or authoritarian and negatively

associated with perceived authoritative parenting. Similarly, Enright et al. (1980) contrasted autocratic with democratic, permissive families, and found that the former discouraged more mature identity explorations.

Hess and McDevitt (1984) suggest that authoritative parents encourage independent problem solving and critical thinking. Authoritative parents are more likely to engage in inductive reasoning that is conducted in the context of a warm relationship with children. This style of communication enhances the development of more sophisticated ego identity among adolescents (Gecas & Seff, 1990; see also Bhushnan & Shirali, 1992, 1993) because it provides opportunities for adolescents to engage in active exploration of ideas. Under-controlled adolescents, raised by parents employing permissive and neglectful styles, are not socialized to become self-regulated and the result is greater impulsivity (Barber, 1996) and lower self-reliance and orientation to work (Lamborn et al., 1991; Wintre & Yaffe, 2000). Thus, under-controlled adolescents would struggle to establish commitments necessary for identity formation, and engage in the more impulsive forms of risk taking like binge drinking and unsafe driving.

Authoritarian parents discourage active exploration of ideas and problem solving and encourage dependence upon the control and guidance of parents (Hess & McDevitt, 1984). For example, Kerpelman and Smith (1999) report that the majority of delinquent adolescent daughters among 25 mother/daughter pairs had relationships in which mothers invalidated the daughter's positive identity statements or contradicted the daughter's positive and negative assertions about her identity. Similarly, Hauser et al. (1991) found that adolescent ego identity level was positively associated with styles of interaction that are supportive and enabling and negatively associated with constraining styles. Consistently negative or ambiguous feedback from a parent does not reflect a responsive relationship and is unlikely to encourage identity exploration.

Adolescents who are over-controlled by authoritarian parents or under-controlled by permissive or neglectful parents are not provided with opportunities to practise exploration of ideas and self-regulation (rather than other-directed regulation or low regulation) during active problem solving. The result can be the development of maladaptive strategies during problem-solving. For example, the relationship between parenting styles and adolescent employment of coping strategies has been assessed by Aunola, Stattin, and Nurmi (2000). Adolescents socialized by authoritative parents tend to employ adaptive, task-oriented strategies that are associated with moratorium/achievement identity. Over- and under-controlled adolescents are more likely to engage in task-irrelevant or passive behaviours that characterize the coping strategies of diffused-identity individuals.

Parenting styles and practices need to adjust with respect to parental authority as children make the transition to adulthood. Grotevant and Cooper (1985) have long argued that adolescence is a period of gradual renegotiation in relationships that are more asymetrical and authority-focused in childhood to more peer-like mutuality between adolescents and parents as being equals. Assessing the influence of parents on adolescents and vice versa, their perspective on identity formation focuses on the process of individuation which is characterized by an interplay between individuality and connectedness of family members (see Cooper, Grotevant, & Condon, 1983; or an alternative view by Adams & Marshall, 1996). **Individuality** is reflected by separateness (distinction of the self from that of others) and self-assertion (the expression of one's own viewpoint). Both separateness and self-assertion in family interactions are viewed by Grotevant and Cooper as a healthy family process pertaining to each individual's right to have opinions or viewpoints that can differ from others in the family (see also Minuchin, 1974). In this perspective, **connectedness** is identified as a sensitivity to and respect for others' view (called mutuality) and openness and responsiveness toward others (called permeability). It is argued that mutuality can offer adolescents support for developing their beliefs, with permeability providing boundaries between the self and others. The central argument of this individuation model is that individuality and connectedness provide a family environment where all members can explore and clarify their individual views and ultimately establish a sense of identity. Such a family environment is likely founded upon authoritative parenting.

Observations of family interactions by Cooper, Grotevant, & Condon (1983; Grotevant & Cooper, 1985), reveal that adolescents who are rated high in identity exploration have fathers who manifest sensitivity and respect for other family members' views and mothers who are lower in responsiveness. Families that facilitate higher levels of identity formation have parents that are likely to encourage independence and self-assertion (able to state their own ideas) among their adolescents and tolerate a certain degree of conflict while maintaining an affectionate and supportive family. The low exploration adolescents come from families that are likely to avoid disagreements and express high levels of permeability.

Grotevant (1983) and others (Sprinthall & Collins, 1995) believe that a moderate degree of connectedness, reflected through shared affection and an acceptance of individuality, provides the psychological foundation and security to begin the searching process for self-defined commitments. The searching process should move individuals into the state of moratorium and enhance developmental progression toward identity achievement. In contrast, weak affectionate bonding with parents and poor communication levels, reflected by rejection or psychological withdrawal, is thought to provide an insecure or constricted psychological base for self-exploration. Further,

extreme affection (enmeshment) between adolescents and their parents and limited family tolerance for individuality might enmesh adolescents and encourage foreclosure in identity formation.

5. Parenting, Identity and Prevention

Parenting has previously been associated with adolescent identity; however, we suggest that the research literature may not provide an adequate explanatory link between parents' behaviours and adolescent health-related outcomes. Parents' behaviours are unlikely to be directly related to adolescents' mental health and health-risk behaviours; it is likely that the association between parenting and adolescent health is mediated by adolescents' ability to negotiate the social world. Thus, we propose that parenting styles and practices shape adolescent ego identity formation (as described in sections 1 and 2), and the resulting ego- and self-structures function to guide the presentation of self in the social world (Côté & Levine, 2002). Identity statuses such as moratorium and achievement are more likely to be associated with fewer engagements in health-risk behaviours while identity diffusion has a greater likelihood than the other statuses to be related to poorer mental health and more frequent engagement in the health-risk behaviours described above. Identity development problems can be, in essence, health problems. Further, individual differences in mental and physical health may be associated with the quality of the parent/adolescent relationship during identity formation.

It is possible to improve adolescents' health status (e.g. drug addiction rehabilitation) or problems associated with identity development (e.g. psychotherapy); however, such interventions are expensive for both young people and their communities. Intervention at the point where there is a problem is expensive because it draws on health resources and potential years of life are often lost through preventable, unintentional injuries associated with risk-taking behaviours. Beyond monetary considerations, compromised health of youth is a loss of individual potential. Thus, we argue that prevention of identity development problems is the optimal intervention and this can be accomplished through assisting parents, adolescents and communities to ensure that parent/child relationships support a trajectory of developmental individualization such as identity moratorium and achievement.

III Implications for Parents, Adolescents and Communities

1. What Parents Need to Know

Life in late-modern (contemporary) societies presents challenges that were not found in earlier societies, or even in the formative years of many parents of adolescents. With fewer choices, life-course trajectories were more straightforward and less stressful. Now, life-course trajectories follow many more patterns and can be stressful because of their uncertainty. At the same time, the young person encounters many influences (especially from the popular media) that appear to represent free choice, but often constitute attempts to manipulate them to live in the present and to pursue immediate gratification. Parents can support their adolescents by enabling them to develop strategies to acquire appropriate knowledge about these influences and to think seriously about the challenges of establishing life-course trajectories that protect health and well-being.

The tendency to avoid making choices and attempting new experiences may be the product of previous negative experiences in certain situations. For example, school can be experienced as negative when grade attainment is consistently low, when the student is unpopular among peers, and when teachers single students out because of their "different" background (social class, race, culture, etc.). Parents need to investigate the possibility that their adolescent is facing problems in certain situations and if their adolescent, in reaction to the negative social experiences, is avoiding experiences that could be growth enhancing.

The links among culture, family relations and identity formation (e.g. see Côté, 2000a; Baumeister, 1986) suggest that the nature of intergenerational relationships can be changing as economic, political, ideological and social-organizational systems evolve. There are, as suggested by Figure 1, predominant forms of identity that accompany the social realities of each era. For generations of the agrarian and early settlement era, the postfigurative culture was based primarily on the authority of parents and identities were primarily assigned. Thus, foreclosed identities were the immediate adaptation of the postfigurative reality. In much of the 20th century, the industrialization era provided opportunity to pick and choose identities based on opportunity and success. Individuals had freedom, and indeed societal expectations, to explore and discover or construct an identity that fit their sense of authentic or constructed self. The most adaptive form of identity for that century was found in the moratorium and achievement statuses. However, society is moving toward an imbalance

between the power of youth and adult authority. Youth are increasingly setting standards which they expect adults to learn and accommodate, parents have become more permissive, and many adolescents and youth have adopted a tendency toward identity diffusion and characterological moratorium as a way of adapting to these influences. Some authors refer to this tendency as an escape from the self, others speak of cultural adaptation, but all are referring to how one manages an identity in the emerging prefigurative society.

We suggest that parents be informed of the following:

- In postfigurative society, parents were encouraged to use an adult-authority practice, where adolescents were instructed to know their place and assigned roles and identity as they became adults. In a cofigurative society, from which we are evolving, parental practices are expected to include warmth, shared control and mutuality with a growing balance between authority of parent and adolescent. In the emerging prefigurative society, parents are adopting a permissive child-rearing style where youth inform the parents of acceptable standards of conduct, norms and conventions. In this cultural form, youth can avoid the formation of a fixed or stable identity, and can instead fit in and get by through managing short-term, situationally specific images and impressions. Parents need to guard against letting these influences overwhelm their adolescents and derailing their growth.

- Parenting is now a balancing act among competing influences and pressures, and must often be accomplished with limited resources for the parent or the adolescent.

- Prior research suggests that allowing adolescents some freedom of expression in a safe and secure environment is most likely to facilitate growth in identity formation.

- In the 20th century, and perhaps yet today, the informationally based ways of thinking, and forms of identity resulting from the exploration of options and making choices, have been found to be associated with greater social success, balanced personality tendencies, and emotional and behavioural health. The avoidance of openly exploring options (identity diffusion) has been found to be associated with the highest levels of health-related risk taking and emotional or behavioural health problems. There is no evidence to suggest that avoiding the task of individualized identity formation constitutes a healthy adaptation to the emerging prefigurative culture, even if it is the easiest adaptation to social and economic changes.

- Parenting practices of authoritarian styles are likely to promote arrested identity development (identity foreclosure). Authoritative styles are most likely to enhance moratorium and identity achievement. Permissive styles are most likely to generate forms of identity diffusion. Each style has its own cultural connections and likely its own cultural expression.

2. *What Parents Need to Do*

In a time when technology, media, government commitments, school reforms and corresponding cultural change are occurring, the following suggestions to parents are presented:

- Parental practices that enable adolescents to develop the ability to consider complex issues and make decisions in a rapidly changing social context will assist in avoiding default individualization. Parental communication practices that are reflection enhancing for the adolescent promote complexity of thinking about the social world (see Applegate, Burleson, & Delia, 1992). Reflection-enhancing communication (e.g. explicit encouragement of adolescents' expression of views) promotes consideration of one's own actions, regard for others' views and tolerance of differences. Further, reflection-enhancing communication about feelings (e.g. encouraging adolescents to consider their own emotional responses to situations or events) can assist adolescents in "self-soothing" which, in turn, may prevent engagement in impulsive behaviours.

- When assisting adolescents to establish goals and values, try to help them reflect on their experiences and the situations of others rather than relying on commands. Ask questions that help adolescents make judgments about their behaviours. Learning to make judgments about their behaviours will help promote thoughtful consideration of risks.

- When parents do not give adolescents some responsibility for choices about important issues, adolescents may struggle with establishing a sense of uniqueness that is very important for identity development. However, permissive parenting (either indulgent or neglectful) that allows adolescents to make choices about too many important issues provides too little guidance and youth may flounder during decision making about critical health and moral issues.

- Expectations for behaviour require adjustment as adolescents develop. During early adolescence, adolescents and parents tend to experience some disagreement about appropriate expectations for behaviour. In middle to late adolescence, most of the differences diminish along with the disagreements.

Parents may feel some frustration over disagreements in early adolescence, but it is important to establish reasonable expectations of behaviour using clear explanations that focus on relevant issues and yet support psychological autonomy.

- Show acceptance of even difficult behaviour where it is not harming the youth or family. Express warmth and interest and try to avoid responding with hostility, restrictiveness or emotional distance.

- Work with the schools and other community resources and youth to develop family/school prevention programs that use natural caregiving systems that provide support for identity exploration. Use local consultation with experts on adolescent identity formation to acquire information, knowledge and analysis of potential programs for enhancing identity development.

3. *What Adolescents Need to Know*

Just as with their parents, adolescents would benefit from knowing that life in contemporary societies around the world presents challenges that were not found in earlier societies. With fewer choices, preparing for adulthood was more straightforward and less stressful. Now, people's lives follow many more patterns and can be stressful because of their uncertainty. At the same time, the young person encounters many influences (especially from the popular media) that appear to represent free choice, but often constitute attempts to manipulate them to live in the present and to pursue immediate gratification. Thus, adolescents need to be aware of the many attempts to manipulate their behaviour from the media, advertisers, musicians and their peers. Developing the personal resources necessary to evaluate information from these sources and understand their own possible roles within social, economic and political systems and situations is critical for developing complex cognitive strategies. Resisting immediate gratification and temptation to pursue pleasures over responsibilities are essential skills for ensuring avoidance of risk behaviours and undertaking the developmental individualization process where one takes control of the direction that one's life will take. Following the paths of least effort and resistance are common today, and even encouraged by popular media influences, but taking more difficult paths that require effort, concentration, practice and determination will help avoid default individualization where decisions about one's life are made by others.

The above means that far more learning of complex material must now be undertaken if the adolescent wants to eventually benefit as an adult from the affluence and benefits contemporary societies offer. In the past, things more often "just

happened" in people's lives; increasingly, individuals must "make them happen," or find themselves in adulthood with few skills to take to the workplace and with minimal connections to a supportive community that will help them fully enjoy their lives.

At the same time, adolescents need to be considered as partners in effecting efforts to enhance their well-being. We make the following suggestions regarding what adolescents need to know:

- There are three predominant forms of identity development among contemporary youth. These forms of identity are reflective of differences in how youth manage their identity development. The diffused style often avoids making commitments, goes with the values and expectations of the immediate peer group, and manages impressions rather than adopts values, goals or plans. The foreclosed identity style bases its foundation on social conventions of family, peers, teachers and society. This style is based on conformity to the norms and values of significant others. The informational identity style, which is reflected in the moratorium and identity achievement statuses, bases identity on a self-construction of acceptable values, behaviours, goals and commitments.

- The nature of exploration is facilitated or inhibited by the family, and the investment that an adolescent places in any one of the three basic identity styles, has implications for long-term behavioural, emotional and possibly physical health. The evidence indicates that the identity-diffuse youth is at greatest risk for maladjustment, delinquency and suicide.

4. *What Adolescents Need to Do*

- Get involved in personal growth-enhancing activities. Watching television and hanging out are acceptable activities, but if they comprise the main proportion of one's daily activities, potential talents may go unrecognized and untapped, and life will "happen to the person." Moreover, adulthood will be entered with poor preparation for the advanced levels of awareness and skill that are increasingly being required in the more rewarding occupations and careers. At the same time, there is a need to be realistic about one's strengths and limitations, so as to pursue goals that can be achieved. In addition, keeping multiple options open in the event that certain ones do not work out will help avoid restricting life-course options or opportunities later in life.

- Work to develop your knowledge of the world and your strengths to function in it. This task involves more than being popular with peers. It involves the ability to understand current political and economic events, and to read across various sources of information and critically evaluate media such as television.

It is important to obtain the skills to figure out how to learn something when confronted by new information or a puzzling situation. Putting oneself in novel and challenging situations, including interacting with adults, being involved in community events and joining groups as a member or leader will expand skills and networks with others, making the transition to adulthood easier and more successful.

- Accept the responsibility to use the period of life known as adolescence and young adulthood to invest in "who one is." Increasingly, everyone is the "captain" of their destiny, for good or bad. This means learning how to overcome obstacles and barriers. Be conscious of the ongoing cultural evolution occurring and find effective alternatives to merely drifting through life (identity diffusion). Part of this responsibility involves finding respectful ways to face differences between adolescents' life experiences and those of their parents and others.

- Take the initiative to engage in non-confrontational, positive talks with parents about future plans. Nowadays, many young people feel they must "bring up mom and dad." Recognize that most parents want their children to succeed. Talk about ways that the family can help with gaining experiences that will enhance adolescents' future goals. Explore ideas freely if parents are willing; if not, look to teachers, coaches, guidance counsellors, other relatives or community groups for assistance in planning for the future.

- Learn the importance of, and how to, stay physically and mentally healthy during your adolescence, because you can have a long life ahead of you. Damage you do to yourself now, and bad habits you pick up, become part of who you will become as an adult. While some of these things can be reversed, others cannot.

5. *What Communities and Governments Need to Know*

Sociologists concur that the individualization process is now essentially compulsory for citizens of Western democracies. With the rights and freedoms of democracies come the burdens of choice, including becoming informed about one's options and taking responsibility for one's choices (see Adams, 1985 for a review of research on identity and political socialization). Of the identity statuses, research is showing that identity achievement represents the most viable trajectory of developmental individualization (Côté & Schwartz, in submission). Specifically, it appears that identity achievement involves the most agentic personality and supports the greatest strides toward integration into the adult community during late adolescence. In contrast, identity foreclosure involves community integration but lower

levels of personal agency, while identity diffusion reflects low levels of both. Finally, moratorium seems to represent (transitory) low levels of agency and difficulties in establishing forms of integration with the adult community.

In making recommendations based on this research, it is important to note that the agentic qualities associated with developmental individualization involve several key personality strengths that need to be nurtured from childhood through adolescence. These include the senses of self-esteem, ego strength, purpose-in-life and an internal locus of control (Côté, 1997). These strengths give the person the resources to actively engage in the compulsory individualization process. With these attributes, options and choices are handled in a more mature and proactive manner, rather than an avoidant or passive one that can lead to risk behaviours and compromised health status.

Diffusion or any form of identity formation resolution that is associated with social deviance enhances the likelihood of interactions with subcultural communities or peer-related activities that engage in health-risk behaviours. In contrast, youth who develop and formulate stronger senses of ego identity, where the immediate community positively endorses the identity formation, are likely to have a strong sense of investment in the future, recognized goals and plans, and a sense of meaningfulness and personal control. These youths are less likely to engage in potentially destructive risk-taking behaviours. They are more likely to engage in calculating a risk-to-gain ratio before engaging in risk behaviours.

Community and school programs need to be informed and supported to address the following problematic forms of identity formation:

- Adolescents who are unconcerned about present and future goals are at higher risk for health problems, and engage in extreme forms of behaviour as a substitute for more positive activities. Being more alienated and ambivalent, they are more likely to engage in risk-taking behaviour without considering the long-term consequences, and to establish less healthy long-term behaviour patterns that may become permanent adulthood lifestyles (e.g. excessive drinking and drug taking, poor eating habits and unprotected sex). With fewer intimate social support contacts, these adolescents can appear isolated and alone. They are more easily swayed by peer pressure that can produce social deviance and health-risk behaviours. Often these youth tend to gravitate together, so they may have supportive relationships that do not necessarily provide a healthy or positively supportive environment. The risks for social deviance and health-compromising behaviours can be targeted through programs that promote growth in identity by encouraging exploration of different ways of thinking and of their own interests and skills.

- Youth who base their lives on early childhood identifications and imitations of their parents are generally cautious, inhibited and relatively dependent on their parents for a source of support. These adolescents tend to be liked by their teachers as they are more obedient and are less likely to challenge authority. While they are unlikely to be at high risk for identity-related health problems, this can change if their support system breaks down and social conventions and norms no longer protect them from seriously considering alternative standards of behaviour. Accordingly, such youth need to be recognized as being at risk if the quality of their family relations is threatened, religious conventions are challenged, belief systems are compromised, or if traditional societal conventions are displaced through migration to Canada (e.g. immigration or seeking refuge in Canada).

- Young people in the process of actively exploring themselves and the world around them are often anxious because they are searching for a place in the world. They are most susceptible to information, facts and knowledge during this search, and while they may experiment with risk-taking behaviours, they should be relatively open to information in prevention programs and public media regarding risk and possible costs.

6. *What Communities and Governments Need to Do*

Communities include immediate neighbourhoods and schools, as well as all levels of government from municipal to federal. Ideally, these levels, which range from the micro to the macro, act in concert to provide consistency in socialization processes. Unfortunately, contemporary Canadian society exhibits many of the deleterious features of late-modern, prefigurative societies, including run-down neighborhoods with few facilities other than shopping malls (if that), poor non-automobile transportation networks, high levels of child and youth poverty, and disjunctures between public schools and the workplace resulting in high levels of youth unemployment - - all coupled with a lack of consensus regarding how to improve current conditions. We believe that improvements can be made that benefit young people along the following lines:

- Community leaders at all levels need to recognize behavioural, mental and physical health risks that often accompany less mature forms of identity formation and individualization through programs that encourage more mature and adaptive forms of identity formation. One strategy is to design programs that help adolescents to become more informationally oriented (i.e., tend to seek relevant information before taking action) so they can learn how to take

healthy risks and avoid health-compromising risks as part of growth-enhancing explorations. Such programs might teach skills such as decision making, problem solving, mediation and goal setting.

- Models for communities to emulate and adapt to local circumstances, such as Youth Charters, need to be developed. These charters provide coordinated sets of expectations and standards that allow young citizens a place to develop in a caring community, and become active, constructive participants in directing their own lives and getting to know their social worlds. In addition, the charters provide feedback about how one is doing in terms of growth experiences and social integration. Thus, these charters should provide the contextual support necessary for the types of positive identity transitions discussed above.

- Community resource networks need to be established that increase physical resources for adolescents (e.g. community centres offering sports, arts and music programs) and emotional resources for their parents (e.g. parenting courses).

- Schools need to support adolescents to make the most of their educational opportunities. They should use work experiences as part of a long-range plan to achieve adult independence in a viable career path and teach students how to consume the mass media in an informed and mature manner, and to resist the impulse to imitate, directly or indirectly, media-endorsed behaviours. Programs for helping parents to join in this effort also need to be established.

- Schools need to communicate effectively with parents and adolescents to encourage the development of family/school prevention programs that utilize natural caregiving systems that provide support for identity exploration. Incorporating the support of local experts on adolescent identity formation would enable schools to acquire information, knowledge and analysis of potential programs for enhancing identity development.

- Policy makers need to design and implement school-based parent and adolescent conferences for the healthy discussion of culture, identity and health. The focus needs to be on the recognition of similarities and differences of the past, the present and the future, while acknowledging the challenges due to technological, economic and political changes for the present and future generations.

- Some parents spend a great deal of time outside the family in work-related activities. Employers can work together with employees to enhance the balance between work and family and facilitate parents' efforts to guide their adolescents to adulthood.

- Communities need to be cognizant of how the rapidly changing workforce would benefit from enhancing opportunities for meaningful employment of youth and find ways to help community members and parents understand the difficulties for youth in selecting careers in the midst of a rapidly changing work context.

- Canada has relatively limited empirical-based knowledge of its adolescents. There are no widely recognized centres of research excellence that focus on normative development and social problems among Canadian teenagers. The few internationally recognized experts on adolescence are spread throughout the country and work in moderate isolation from other such experts. Much of any analysis of contemporary youth in Canada is based on European and U.S. data. Little is known about cultural, gender or developmental differences for diverse groups across this country. No university has established a research centre or training program focusing on training research experts in adolescent and young adult populations. To remedy this, the federal government should establish a National Center for the Study of Adolescence and Youth with a focus on the emotional, social, behavioural and physical health of adolescents and young adults. This can be modelled after the Youth Councils and youth research networks found in all Scandinavian countries (Côté & Allahar, 1994).

- Regional research programs should be funded to study the connections between culture, parenting, identity and health. As identity formation becomes more commonly identity diffusion, we expect a widespread increase in identity disorders, parental concerns about identity problems in the home, and associated implications for emotional or mental and behavioural health. We already know that for young women, eating disorders, as one expression of identity formation, are causing substantial health problems. We know that the social identity of gangs is connected to criminality. Several personality disorders are thought to be connected to early problems in identity formation. Studying the link between identity formation and health outcomes will assist in better determining how to promote adolescent health. As a country comprising multiple ethnic and religious communities, various issues regarding cultural, social and personal identity of youth emerge from familial, school, community, and political circles. Recognizing the variability in communities across Canada, a need for regional research programs appears evident.

- Research priority needs to be given to understanding how developmental individualization can be enhanced by specific parent/child relations and practices. For example, we need to learn more specifically how differing parenting practices and styles encourage one form of individualization over the other and which practices set the stage for a particular type of identity formation (e.g. identity diffusion rather than identity achievement)

- Research using multi-method, multi-sample, longitudinal data with strong measurement tools remains a high priority in promoting the value of empirical observations to policy implications. Many investigations on families and adolescents are conducted with relatively small convenience samples due to limited funding. More direct funding for health research on the connections between adolescent development, identity formation, social contexts and health behaviours is a necessary beginning point. There is an immediate need for population estimates of identity problems and pathologies so that appropriate measures can be taken to alleviate them (Côté & Levine, 2002).

The model for undertaking many of the above initiatives can be found in Scandinavian countries which, for decades, have actively nurtured their young people as they make their way to adulthood. For example, in Sweden only about 20 people per year under the age of 24 receive prison sentences; of 20 European nations studied, Swedish students feel themselves to be least bullied; and less than 10% of those aged 20 to 25 live with their parents (Côté, 2000a). These are but a few of the statistics suggesting that the transition to adulthood in Sweden has been made far more benign than in Canada. Swedes have maintained their efforts to guide and nurture their young through several initiatives:

- Active employment policies have been maintained to help businesses recruit young people;
- All unemployed young people are eligible for training programs;
- Young Swedes work within the same job categories as other age groups;
- Local authorities and schools are responsible for providing forms of work experience;
- Adolescents over 16 years who remain in school receive a study allowance, and generous, low-interest student loans are available for those who want to undertake post-secondary education; and
- Those who cannot find work and who are not in school are guaranteed unemployment benefits.

In other words, everyone is guaranteed some form of income.

Adult Swedes have also seen to it that young Swedes have opportunities for growth-enhancing activities during their leisure time. Young Swedes have ample opportunities to develop skills through their local schools with respect to the arts and classical music, and 1,500 youth recreation centres providing places for them to meet

those who are not otherwise involved in clubs or sports organizations. At these centres, facilities are provided for rehearsing plays, dance and rock music. Two thirds of males and one half of females are members of some sort of sports association (Côté & Allahar, 1994; Côté, 2000a).

The above are all examples of how the adult community in Sweden has provided identity-enhancing resources for their young. We do not offer Sweden as a panacea, but rather as one example of what can be done when the adult community makes an attempt to truly care for its young and establish a growth-enhancing environment for those making their way to adulthood.

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